



ACS NCCRT Lead Time Messaging Guidebook: *A Tool to Encourage On-Time Colorectal Cancer Screening*

January 24th, 2024
2:00–3:00pm ET

Purpose of Today's Webinar



- 1 Highlight ACS NCCRT's suite of communications resources and share why early messaging and on-time CRC screening is so critical
- 2 Introduce the new ACS NCCRT Lead Time Messaging Guidebook
- 3 Provide an overview of the market research findings used to inform the contents of this guidebook
- 4 Share information and tools that can be used to motivate individuals to get screened on-time for CRC
- 5 Q&A

Acknowledgments



- We would like to thank the **Lead Time Messaging Advisory Committee** who generously offered their time and expertise to the development of this guidebook's research and content.
- A special thank you to the chairs of the ACS NCCRT Family History and Early-Age Onset Colorectal Cancer Strategic Priority Team, **Heather Hampel**, MS, CGC and **Paul Schroy**, MD, MPH, for providing vision, leadership, and guidance.
- **KS&R** did a phenomenal job conducting the market research and analyzing the result used to inform the creation of this guidebook.
- Thank you to the **American Cancer Society** and the **CDC** for providing support, funding, and staff expertise.
- We would also like to acknowledge, with deep gratitude, **Dr. Whitney Jones**, who championed the lead-time messaging concept, as well as two late colleagues, **Drs. Thomas Weber** and **Dennis Ahnen**, who were instrumental in promoting the NCCRT's adoption of this paradigm shift.

Today's Presenters



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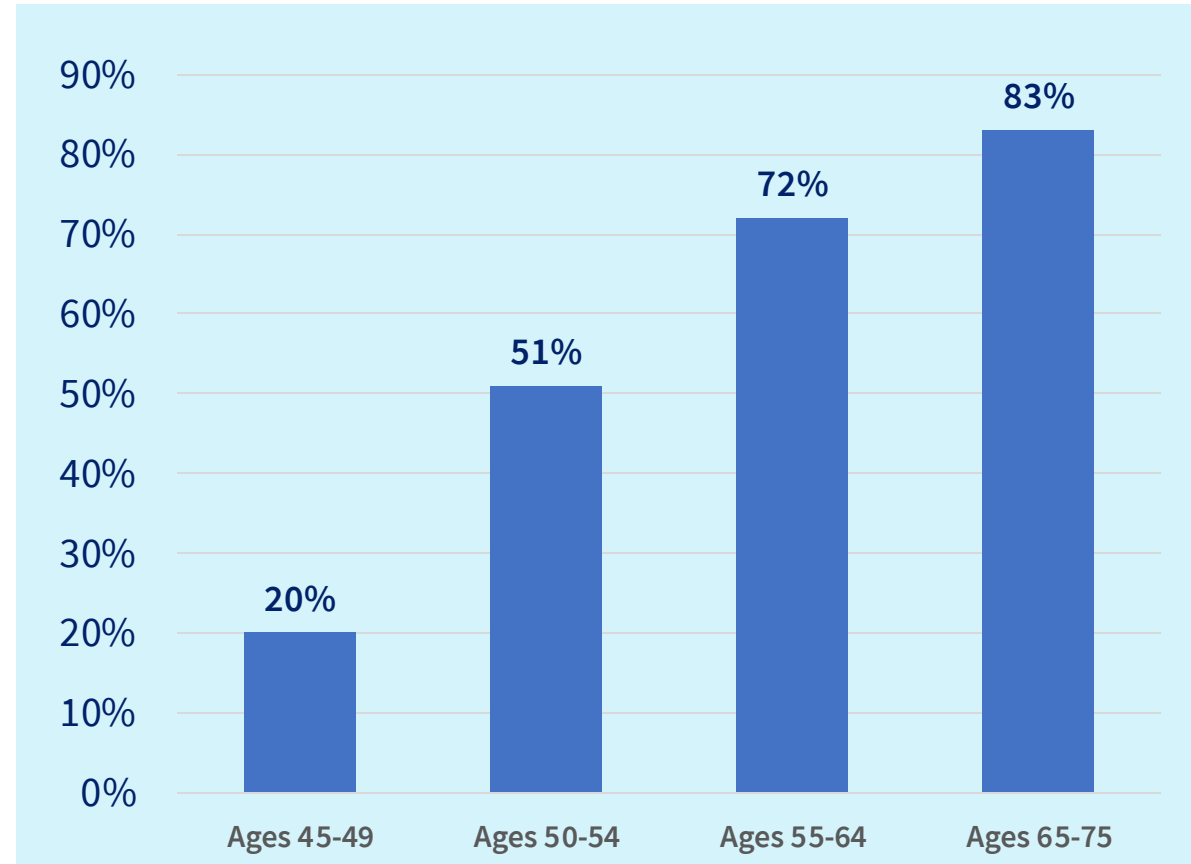
The ACS NCCRT's suite of communication resources

- NCCRT conducted its first market research project in 2014 to better understand the barriers and emotional motivators that influence CRC screening behavior.
 - *80% by 2018 NCCRT Communications Guidebook (2015, 2017, 2019)*
- Followed by additional projects to identify and promote effective communication strategies that educate, empower and mobilize target audiences with low screening rates.
 - *Hispanics/Latinos Colorectal Cancer Companion Guide (2016)*
 - *Asian Americans Colorectal Cancer Companion Guide (2017)*
 - *The NCCRT Colorectal Cancer Screening Messaging Guidebook: Recommended Messaging to Reach the Unscreened (2019)*
 - *Guidebook for Black & African American People (2022)*
- The success of each of these endeavors provided the foundation for the Lead-Time Messaging project.



Why is on-time screening important?

- On-time screening rates for both average risk individuals, especially the 45-54 age group, and those at familial/genetic risk are suboptimal.
- CRC incidence and mortality rates have increased in the <55 age group.
- Adherence to current guidelines could potentially prevent **16%** of EAO CRC and result in an earlier diagnosis in **51%**. (Stanich et al., 2021)



NHIS Colorectal Cancer Screening (%) in Adults 45 Years and Older, 2021, US
National Health Interview Survey, 2021

New data from the *ACS Cancer Facts & Figures 2024* sharpens our focus

- In 2024, close to **153,000** people will be diagnosed with CRC in the US, and **>53,000** people will die from the disease.
- Only **59%** of adults 45+ are up to date with screenings.
- Screening is low among ages 45-49 (**20%**) and ages 50-54 (**51%**)
- **3 in 5** people are now being diagnosed with advanced-stage colorectal cancer.
- **1 in 5** people are younger than 55 years old.



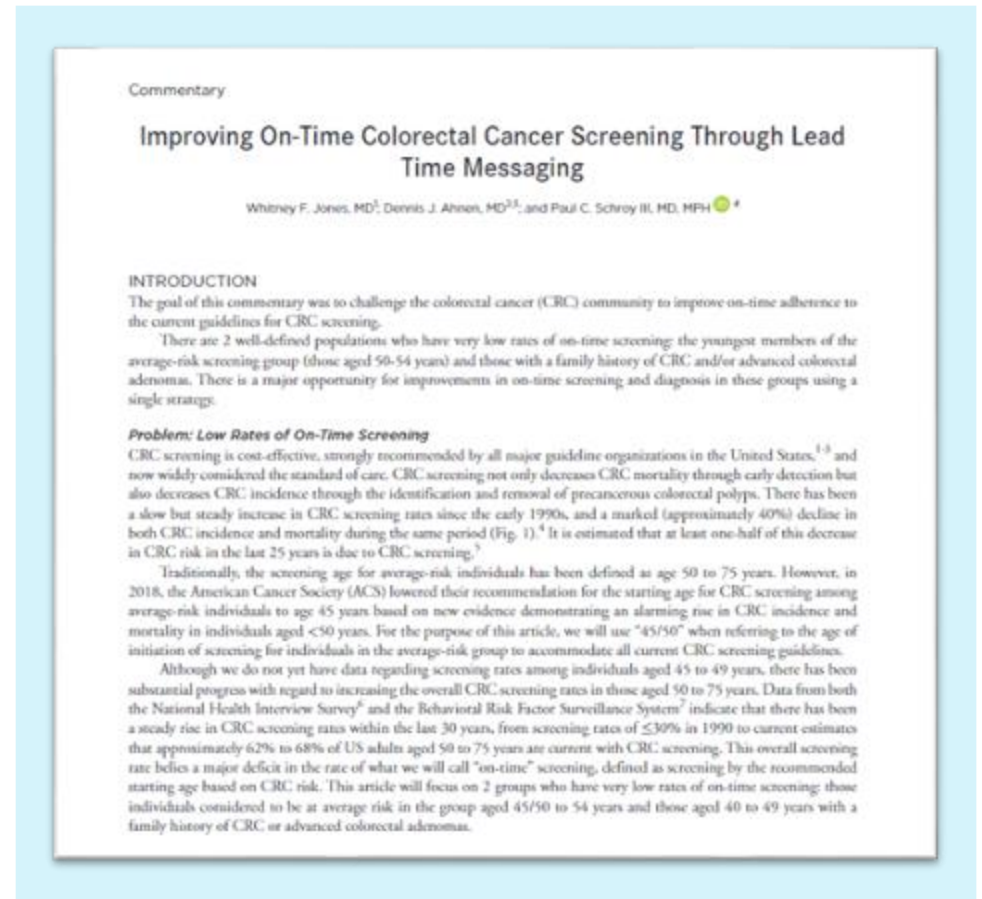
[*Cancer Facts & Figures 2024*](#)

[*Colorectal Cancer Facts & Figures 2023-2025*](#)



How do we increase on-time CRC screening?

- Promote “lead-time” messaging
 - Commentary published in *Cancer*, 2019
- Improve risk assessment practices
 - Hosted a Family History Symposium (2014) and an Early Onset CRC Summit (2017) to identify best practices and research gaps.
 - Risk Assessment and Screening Toolkit (2018)
- Build on the success and popularity of our previous messaging resources.
- Identify best practices for messaging and educating about colorectal cancer screening before the recommended screening age.



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- Identify best practices for messaging and educating about colorectal cancer screening before the recommended screening age.

Commentary

Improving On-Time Colorectal Cancer Screening Through Lead Time Messaging

Lead-time messaging is the delivery of accurate, relevant, and actionable information regarding CRC risk and risk-based screening options **prior** to the starting age recommended by the ACS for average and high-risk individuals.

To maximize effectiveness, messages should be delivered **multiple times**.

family history of CRC or advanced colorectal adenomas.

Goals of the Lead Time Messaging Project:

- Better understand perceptions about CRC, CRC screening, and interactions with the health care system.
- Identify messages that heighten awareness about CRC and the importance of on-time screening.
- Motivate and empower individuals at both average and familial risk to discuss screening with their providers prior to the recommended age of initiation.
- Determine effective messaging that best resonates with different target audiences (e.g., ages 20-29, 30-39, 40-44)



Encouraging On-time Screening Research



Three phases of research were conducted with unscreened individuals under the age of 50.

Phase 1

15-minute unbranded, online survey with a total of 747 individuals ages 20-49 was conducted in September 2021.

Phase 2

(15) 60-minute virtual interviews with individuals ages 20-49 were conducted in September & October 2021.

Phase 3

7-minute unbranded, online survey with a total of 813 individuals ages 20-44 was conducted in April 2022. During the survey, participants completed an advanced analytical exercise (MaxDiff) to identify which of the 12 messages tested would be most likely to motivate their decision to get screened for colon cancer on-time.

The purpose of these first two phases was to understand the current state of this audience - what do they know and how do they currently feel about CRC and CRC screening. Additionally, we tapped into their attitudes and perceptions with regard to healthcare in general, where they prefer to receive health care information, and who they trust to give it to them information to understand how to most effectively reach this younger audience with any messages or information related to CRC screening.

COLON CANCER

Deadly/Fatal

- “It will kill you and it is hard to detect.”
- “Dying painfully and that people tend to get it a lot, especially men.”

Scary/Terrible

- “Scary and I feel like it’s something you get when you’re older.”
- “I think it's a serious disease and it's something older people should be on the lookout for.”

Pain/Discomfort

- “Having to have parts of the colon removed or being in pain.”
- “Pain in the stomach and maybe stool mixed with blood.”

SCREENING

- 1 Colonoscopies
- 2 Probe/finger in the bottom
- 3 Scary/nervousness

1 in 10
say nothing comes to mind

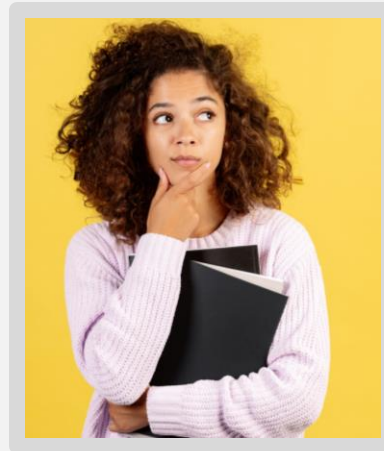
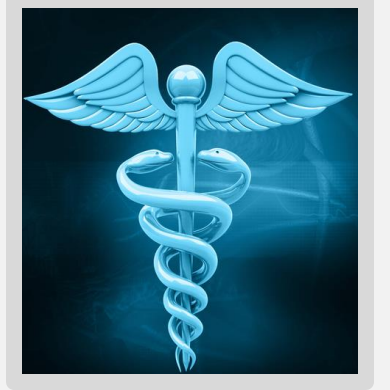


1 in 10 have a family history of CRC



Among those with a family history

- Less than half (45%) have discussed their family history with a HCP
- Only 20% have discussed CRC screening with a HCP
- ~ 3 in 10 plan to wait for their HCP to bring up screening



- **55%** admit to being scared of the actual procedure to test for CRC
- **28%** say they're too young and have not given any thought to screening
- **22%** feel talking about CRC or CRC screening is embarrassing
- **63%** note the recommended screening age is 40 or earlier

Some mention people may have a family history and not know it. Some also note there are culture taboos and families not talking about health issues (specifically uncomfortable ones like CRC).

RECOMMENDED SCREENING AGE

Only 14%

Identify age 45 as the recommended screening age for average risk individuals



76%

Agree everyone should get screened when they reach the recommended age

Once presented with ACS' recommended age:



47%

think people should start based on whatever their HCP recommends



44%

think people should follow ACS' guidelines and start at age 45

4 in 10 45-49 year olds plan to wait for their HCP to bring up screening

INCREASING AWARENESS



78%

Important to
**increase awareness
of CRC and CRC
screening**



78%

People should be
educated about CRC
screening **long before
the recommended age**



12 messages with a variety of themes were tested using an advanced analytical technique to measure which ones will be most impactful in helping encourage younger respondents (i.e. pre-recommended screening age) to get screened on-time.

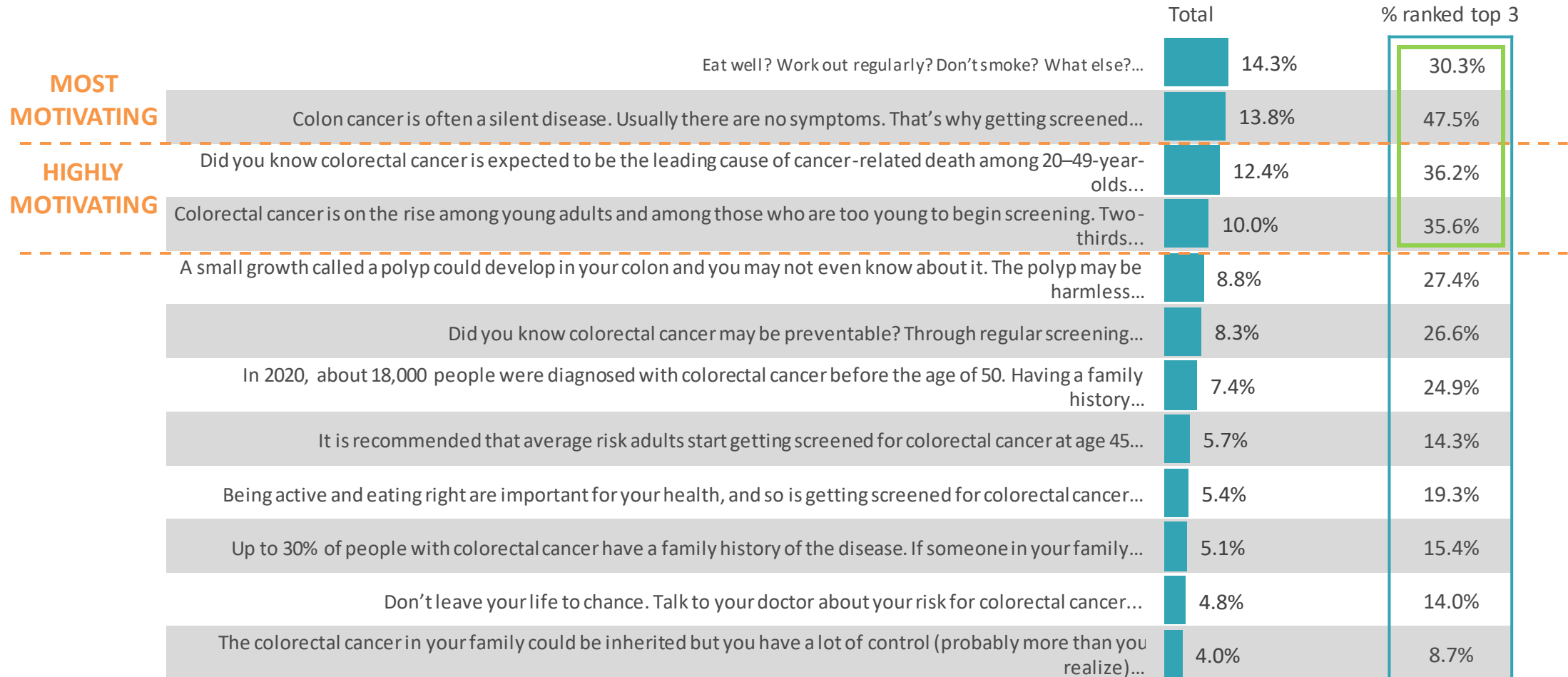
PREVENTABLE

FAMILY HISTORY

PROACTIVE ABOUT HEALTH

MESSAGES PERFORMANCE (SHARE OF PREFERENCE)

‘Eat well? Work out regularly? Don’t smoke?’ and ‘Colon cancer often being a silent disease’ are the messages that will have the greatest impact on motivating on-time screening.



Base: Total (n=813)

M1. When thinking about messages that may encourage you to get screened for colon cancer on-time, please choose the one message that is most likely to motivate your decision to get screened and the one message that is least likely to motivate your decision to get screened on-time.

MESSAGES PERFORMANCE (SHARE OF PREFERENCE) BY AGE / FAMILY HISTORY

All three top messages perform well across age groups, though the number one message varies across the groups. Those with a family history, find ‘Silent disease’ and ‘leading cause of cancer-related deaths’ the most compelling to them.

CRC MESSAGES' SHARE OF PREFERENCE BY KEY GROUPS	Total (n=813)	20-24 YO (n=79) (A)	25-29 YO (n=126) (B)	30-34 YO (n=200) (C)	35-39 YO (n=203) (D)	40-44 YO (n=205) (E)	Family History (n=79)
Eat well? Work out regularly? Don't smoke? What else?...	14.3%	15.5%	15.7%	14.1%	12.8%	14.8%	9.7%
Colon cancer is often a silent disease. Usually there are no symptoms. That's why getting screened...	13.8%	14.7%	12.0%	14.1%	14.5%	13.6%	14.7%
Did you know colorectal cancer is expected to be the leading cause of cancer-related death among 20–49-year-olds...	12.4%	11.8%	11.9%	14.0%	12.9%	10.9%	13.5%
Colorectal cancer is on the rise among young adults and among those who are too young to begin screening. Two-thirds...	10.0%	11.4%	9.3%	10.3%	10.1%	9.8%	12.1%
A small growth called a polyp could develop in your colon and you may not even know about it. The polyp may be harmless...	8.8%	9.1%	8.8%	8.0%	8.4%	9.7%	8.5%
Did you know colorectal cancer may be preventable? Through regular screening...	8.3%	8.5%	8.4%	8.0%	8.2%	8.6%	6.9%
In 2020, about 18,000 people were diagnosed with colorectal cancer before the age of 50. Having a family history...	7.4%	6.1%	7.5%	7.4%	7.2%	7.9%	7.2%
It is recommended that average risk adults start getting screened for colorectal cancer at age 45...	5.7%	4.3%	5.8%	5.7%	5.9%	6.0%	6.2%
Being active and eating right are important for your health, and so is getting screened for colorectal cancer...	5.4%	5.3%	5.9%	4.9%	5.9%	5.1%	3.8%
Up to 30% of people with colorectal cancer have a family history of the disease. If someone in your family...	5.1%	4.8%	5.5%	5.4%	5.3%	4.5%	7.9%
Don't leave your life to chance. Talk to your doctor about your risk for colorectal cancer...	4.8%	4.8%	4.9%	4.1%	4.8%	5.3%	3.6%
The colorectal cancer in your family could be inherited but you have a lot of control (probably more than you realize)...	4.0%	3.7%	4.3%	4.0%	4.0%	3.8%	5.9%

A/B/C/D/E indicates statistically significant difference between groups at the 95% confidence level.

M1. When thinking about messages that may encourage you to get screened for colon cancer on-time, please choose the one message that is most likely to motivate your decision to get screened and the one message that is least likely to motivate your decision to get screened on-time.

PERCEPTIONS OF TOP MESSAGES

The first message is most compelling because when most people think of healthy habits, screening isn't top of mind, but this communicates that it should be, along with the usual measures they may take. The silent nature of CRC is what stands out in the second top message.

Eat well? Work out regularly? Don't smoke? What else?? You're taking all the right steps to live a healthy lifestyle. But are you missing one step that might be easier than you think? Talk to your doctor to find out if it's time for you get screened for colorectal cancer and what screening options are right for you.

“ The message I selected speaks to someone like me who already takes care of their health but could be unaware of a silent cancer.” (40-44 year old)

“ This message makes it seem like if eating well and exercising are easy to do, so is getting screened for colon cancer.” (25-29 year old)

“ Having a healthy lifestyle may not prevent the disease.” (30-34 year old)

“ That living a healthy life style is only one steps of many to living a long life.” (20-24 year old)

Colon cancer is often a silent disease. Usually there are no symptoms. That's why getting screened is so important. It can help prevent colon cancer — or catch it early when it is easiest to treat. Most people should begin screening at age 45.

“ That I could have zero signs and/or symptoms and still have it. I want to get checked and not wait until it's too late.” (30-34 year old)

“ That its silent, meaning you might not have any symptoms.” (40-44 year old)

“ It highlights the importance of screening and preventative care, which is the most helpful to people in general.” (25-29 year old)

“ The fact that I cannot tell on my own without the help of screening whether I have colon cancer or not.” (20-24 year old)

PERCEPTIONS OF SECOND TIER TOP MESSAGES

These messages are most compelling because participants can identify with them since they fall within the age range/young adult demographic referenced in the messages.

Did you know colorectal cancer is expected to be the leading cause of cancer-related death among 20–49-year-olds by 2030? It's never too early to talk to your doctor about when it's appropriate to start screening.

“ It illustrates that you're never too young.” (35-39 year old)

“ I am between the ages of 20-49 so this directly applies to me.” (30-34 year old)

“ It puts the message that you can't put it off out very clearly by giving an age range starting much younger than age 45, like the rest of them said.” (20-24 year old)

“ Because that's my age range and the numbers kind of surprised me.” (40-44 year old)

Colorectal cancer is on the rise among young adults and among those who are too young to begin screening. Two-thirds experience symptoms for many months before they're finally diagnosed. Be sure to alert your doctor if you're experiencing blood in your stool, persistent abdominal pain, changes in bowel habits, or unexplained weight loss. If these symptoms persist, the possibility of colorectal cancer must be considered.

“ It informs you that young adults like myself can get it. It's best we get tested soon.” (20-24 year old)

“ It stands out because silent killers are the most scary to me, and I am a young adult so it speaks directly to my demographic.” (30-34 year old)

“ Cancer is on the rise with younger generations and can be cured if detected early.” (35-39 year old)

“ It mentioned how even young people are susceptible to getting the disease so it resonated with me since I am still in my 20s.” (20-24 year old)

CHANNELS FOR COMMUNICATING CRC SCREENING INFORMATION

51% prefer to receive CRC screening information from health care providers



With most respondents below the recommended screening age, most have not discussed screening with their HCP

Beyond HCPs, other top channels for information include:



Websites (39%)



Online patient health portals (30%)



Emails (29%)



Family/Friends (27%)



81%



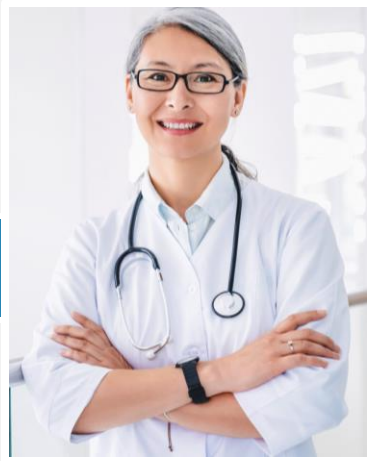
75%



59%

Though not a preferred channel, virtually all are on Social Media making it an ideal source for reaching this audience with CRC and CRC screening information

TRUSTED SOURCES FOR HEALTH INFORMATION



Doctors
85%



Other HCPs
79%



National health orgs.
70%



Family
69%

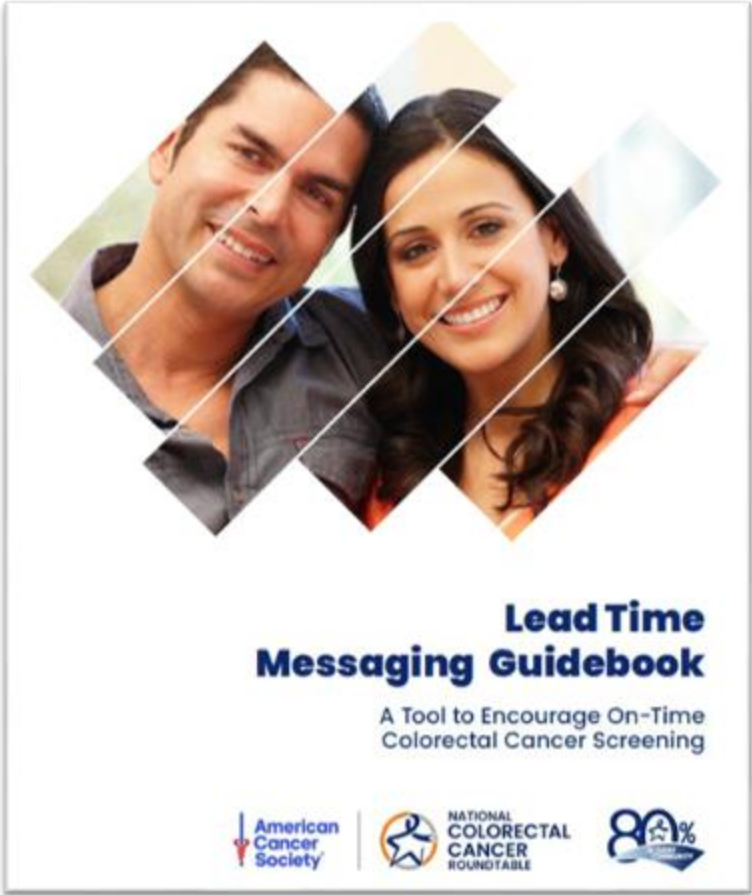


Gov't health orgs.
60%

Intent of this Guidebook

- Share best practices for messaging and educating about CRC screening before recommended screening age
- Encourage people starting in their 20s to discuss their Family Cancer History including CRC and colon polyps and take action as needed
- Encourage people to talk to their healthcare provider about CRC and learn when they will most likely need to be screened
- Motivate individuals to make it a priority to get regular, on-time CRC screening

Guidebook Contents



Key Definitions & Screening Recommendations



National Data on CRC Screening & Rates



Recommended Lead Time Messages



Helpful Tactics to Use for Effective Messaging



Focus on Family History

Key Definitions

On-Time Screening

Individuals with average or high risk for CRC should be screened at the intervals recommended by the ACS screening guidelines and risk factors.

Lead Time Messaging

Lead time messaging relates to the delivery of accurate, relevant, and actionable information regarding CRC risk and risk-based screening options prior to the starting age recommended by the ACS for average and high-risk individuals. The intent of CRC screening lead time messaging is to increase on-time screening rates. To maximize effectiveness, multiple messages should be delivered multiple times in advance of the on-time screening date.

Tailored Messaging

Campaigns use messages that are tailored to reflect the needs, values, and motivations of a specific community. Tailored messages often outperform non-tailored messages when it comes to altering cancer screening behaviors and increasing public knowledge regarding cancer.

Recommended Lead Time Messages



Colorectal cancer is often a silent disease. Usually there are no symptoms. That's why getting screened is so important. Regular screening can help prevent colorectal cancer — or catch it early when it is easier to treat. Most people should begin screening at age 45.

We learned this message is compelling because it highlights the possible silent nature of CRC and the opportunity to prevent it.

- *"That I could have zero signs and/or symptoms and still have it. I want to get checked and not wait until it's too late." (30–34-year-old)*
- *"The fact that I cannot tell on my own without the help of screening whether I have colon cancer or not." (20–24-year-old)*
- *"It highlights the importance of screening and preventative care, which is the most helpful to people in general." (25–29-year-old)*

Recommended Lead Time Messages



- *Eat well? ✓*
- *Work out regularly? ✓*
- *Don't smoke? ✓*
- *What else??*

You're taking all the right steps to live a healthy lifestyle. But are you missing one step that might be easier than you think? Talk to your doctor to find out if it's time for you to get screened for colorectal cancer and what screening options are right for you.

This message is compelling because when people think of health habits, screening isn't top of mind. This communicates that it should be, along with the usual measure they may take to remain healthy.

- “The message I selected speaks to someone like me who already takes care of their health but could be unaware of a silent cancer.” (40–44-year-old)
- "This message makes it seem like if eating well and exercising are easy to do, so is getting screened for colon cancer.” (25–29-year-old)

Recommended Lead Time Messages



Did you know colorectal cancer is expected to be the leading cause of cancer-related death among 20-49-year-olds by 2030? It's never too early to talk to your doctor about when it's appropriate to start screening.

This message is compelling because participants can identify with them since they fall within the age range/young adult demographic referenced in the messages.

- "I am between the ages of 20-49 so this directly applies to me." (30–34-year-old)
- "It puts the message that you can't put it off out very clearly by giving an age range starting much younger than age 45, like the rest of them said." (20–24-year-old)
- "Because that's my age range and the numbers kind of surprised me." (40–44-year-old)

Recommended Lead Time Messages



Colorectal cancer is on the rise among young adults and among those who are too young to begin screening, two-thirds experience symptoms for many months before they're finally diagnosed. Be sure to alert your doctor if you're experiencing blood in your stool, persistent abdominal pain, changes in bowel habits, or unexplained weight loss. If these symptoms persist, the possibility of colorectal cancer must be considered.

- "It informs you that young adults like me can get it. It's best we get tested soon." (20–24-year-old)
- "Cancer is on the rise with younger generations and can be cured if detected early." (35–39-year-old)
- "It mentioned how even young people are susceptible to getting the disease, so it resonated with me since I am still in my 20s." (20–24-year-old)

Using Effective Messaging

Important Messaging Tactics to Remember

- Understanding common fears and anxiety related to CRC and CRC screening and using tailored messaging to help combat those fears will increase the likelihood that screening will occur on time.
- People have different motivations and values and it's important to tailor messaging to their needs. For messaging to be impactful, it needs to feel relatable, give direct and concise information, and include actionable next steps.
- Proper channels and messaging mechanisms are crucial for delivering effective messaging. A recommendation from a clinician can be highly effective at encouraging on-time CRC screening.
- Continuing to share messages about CRC, family history and CRC screening will increase the likelihood of individuals getting screened on-time.

Focus on Family History

Insights Into Family History for Those Under 45:

- Fewer than half of individuals with a family history of CRC receive personalized counseling.
- Have a lack or limited understand of their family history.
- Haven't talked to provider about family history.
- Family history is not sufficiently tracked.
- Do not know their screening age could be different than 45.

The guidebook includes:

- Top tested messages for those with a family history
- Top tested messages about talking with family about CRC
- ACS NCCRT resources & tools: ***Risk Assessment & Screening Toolkit***



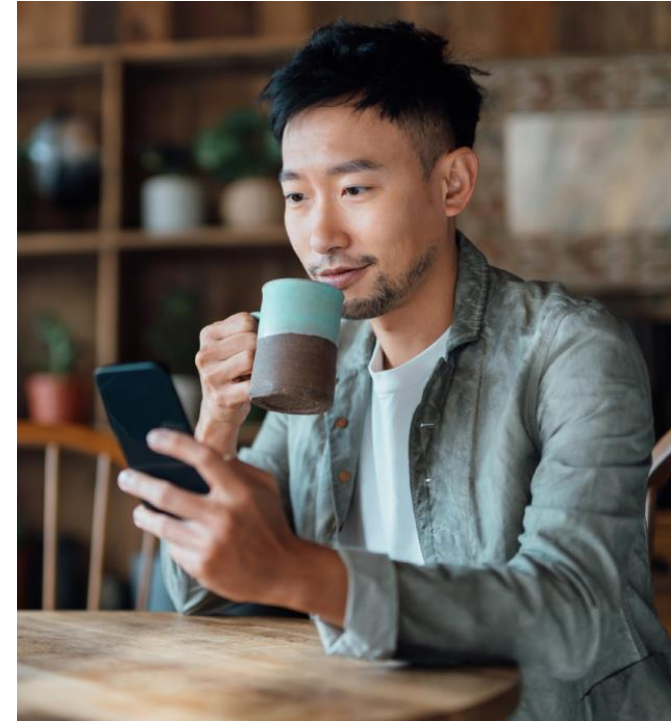
Additional Ways to Add Impact to Your Messaging

Message Delivery

- Channels
- Trusted Sources
- Social Media

Additional ways to amplify your message

- Visuals
- Culturally appropriate messaging
- Serious, firm, clear tone and/or personal and emotionally compelling tone
- Messages delivered by faith-based and community leaders
- Hearing from those with lived experience





Spotlight on the importance of a clinician's recommendation

We know a clinician's recommendation to get screened is incredibly important, as they are a trusted source for relaying health information.

People will be more motivated to get screened when it is recommended by their doctor or another medical professional.

- Many people under 45 have health insurance coverage and see a clinician for routine exams.
- Tend to trust clinician and believe something is being recommended, it is for good reason.
- Less likely to have conversations with health care providers about CRC screening, symptoms, and family history.
- Clinicians can help reduce CRC mortality by using family history to help assess risk.
- Promote primary prevention and early detection as well as considering CRC when evaluating patients with signs and symptoms, regardless of age.





Spotlight on Age Groups

- Spotlight on age groups
 - **20-29**
 - **30-39**
 - **40-44**
- Insight into social media usage
- Feedback identified in the market research
- What tailored messaging to this age group should focus on
- Example of an effective message

Ages 20-29	
This age group...	Helpful tailored messages should focus on...
<ul style="list-style-type: none">• Believes it's important to be screened on time• Finds it important to establish trust with their medical providers• Uses YouTube as a top platform for social media• Is more likely to be on TikTok than other age groups	<ul style="list-style-type: none">• Symptoms related to CRC and how to have a conversation with clinicians about symptoms they may be experiencing.• The importance of knowing your family history• Encouraging conversations with family about medical history related to CRC
Eat well? ✓ Work out regularly? ✓ Don't smoke? ✓ What else??	
Message Example:	You're taking all the right steps to live a healthy lifestyle. But are you missing one step that might be easier than you think? Talk to your doctor to find out if it's time for you to get screened for colorectal cancer and what screening options are right for you.

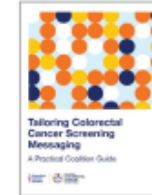




Spotlight on Other Helpful ACS NCCRT Resources

- Tailored Colorectal Cancer Screening Messaging: A Practical Coalition guide
- Risk Assessment & Screening Toolkit
- Steps for Increasing Colorectal Cancer Screening Rates
- 2022 Guidebook for Black & African American People
- 2019 Colorectal Cancer Screening Messaging Guidebook

Tailoring Colorectal Cancer Screening Messaging: A Practical Coalition Guide



This resource is targeted at coalition members and leaders who are looking to make highly effective campaigns to increase colorectal cancer (CRC) screening rates in their communities, especially for those who are hardest to reach. Research shows that tailoring health messaging to a specific community produces greater changes in health behaviors, such as around CRC screening. By using this step-by-step guide, coalitions can access practical tips, strategies, and successful case studies illustrating the process.

Risk Assessment and Screening Toolkit: To Detect Familial, Hereditary, and Early-Onset Colorectal Cancer



Limited or inaccurate family history collection and risk assessment is a major barrier to successful cancer screening. Individuals who have a first-degree relative with colorectal cancer (CRC) are at least two times more likely to develop CRC, with the risk increasing with earlier ages of diagnosis and the number of relatives diagnosed with CRC. Therefore, screening and prevention efforts must focus on those with familial or hereditary risk, which requires collecting the necessary family history information for risk assessment. Primary care clinicians play a pivotal role in identifying people at increased risk for CRC and facilitating recommended screening.

Steps for Increasing Colorectal Cancer Screening Rates: A Manual for Primary Care Practices



The goal of this manual is to offer evidence-based, expert-endorsed recommendations for planning and implementing strategies in primary care practices to improve colorectal cancer screening rates. This manual provides a concise step-by-step guide for primary care teams to improve colorectal cancer screening and outcomes in practice.

We all play a role in this important work!

Whether you work in a health system, community health center, health plan, non-profit, etc., you can use the tested messages and market research findings to spread awareness in the communities you serve. It's never too early to start planning your activities for March, **National Colorectal Cancer Awareness Month!**





Questions?

nccrt.org @NCCRTnews #NCCRT2024